

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756339

FILED
Apr 12, 2008
Secretary of State

Entity Name: EAST LAKE WOODLANDS CONDOMINIUM UNIT SEVEN ASSOCIATION, INC.

Current Principal Place of Business:

C/O CALIBER CONDO MGT
32708 US 19 NORTH
PALM HARBOR, FL 34684 US

New Principal Place of Business:

C/O CALIBER CONDO MGT
32712 US 19 NORTH
PALM HARBOR, FL 34684 US

Current Mailing Address:

C/O CALIBER CONDO MGT
32708 US 19 NORTH
PALM HARBOR, FL 34684 US

New Mailing Address:

C/O CALIBER CONDO MGT
32712 US 19 NORTH
PALM HARBOR, FL 34684 US

FEI Number: 59-2065201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, MARJORIE J
32708 US 19 NORTH
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

BROWN, MARJORIE J
32712 US 19 NORTH
PALM HARBOR, FL 34684 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARJORIE J. BROWN

04/12/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAREY, RAY
Address: 101 WOODLANDS COURT
City-St-Zip: OLDSMAR, FL 34677

Title: SD () Delete
Name: SEIGEL, MARILYN
Address: 208 MARY DR
City-St-Zip: OLDSMAR, FL 34677

Title: TD () Delete
Name: WEBER, WILLIAM
Address: 107 MARY DR.
City-St-Zip: OLDSMAR, FL 34677

Title: DVP () Delete
Name: RODRIGUEZ, LYDIA
Address: 101 CAMILLE CT.
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: SHARKEY, JOHN
Address: 106 CAMILLE CT.
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: VEIEZ, JUAN
Address: 108 WOODLANDS CT
City-St-Zip: OLDSMAR, FL 34677

Title: TD (X) Change () Addition
Name: BRUSCHETTI, DOLORES
Address: 128 CAMILLE CT
City-St-Zip: OLDSMAR, FL 34677

Title: DVP (X) Change () Addition
Name: RODRIGUEZ, LYDIA
Address: 107 CAMILLE CT.
City-St-Zip: OLDSMAR, FL 34677

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARJORIE J. BROWN

AGT

04/12/2008

Electronic Signature of Signing Officer or Director

Date